IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Box Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

NEW APPLICATION TRANSMITTAL

Transmitted herewith for filing is the patent application of George Garrity and Catherine Lyons for Systems And Methods For Resolving Ambiguity Between Names And Entities.

CERTIFICATION UNDER 37 C.F.R. § 1.10

I hereby certify that this New Application Transmittal and the documents referred to as enclosed therein are being deposited with the U.S. Postal Service on this date January 16, 2004 in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number El 992 783 941 US addressed to: Box Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Type Of Application 1.

This new application is for a(n)

Original (nonprovisional)

۷ 2. Papers Enclosed That Are Required For Filing Date Under 37 C.F.R. § 1.53(b) (Regular) or 37 C.F.R. § 1.153

(Design) Application

29 Pages of Specification

Pages of Claims 3

Page of Abstract

Sheets of Formal Drawings

3. Declaration

> X Enclosed

> > X Unexecuted.

Inventorship Statement 4.

The inventorship for all the claims in this application is:

the same

Language

× English

Fee Calculation (37 C.F.R. § 1.16)

× Regular application

CLAIMS AS FILED

	Number Filed		Number Extra 18 - 20 =	Rate	Basic Fee - \$770.00 (37 C.F.R. § 1.16(a))		
Total Claims (37 C.F.R. § 1.16(c))				1.16(c))	0 × \$18.00 =	\$0.00	
Independent Claims (37 C.F.R. § 1.16(b))			F.R. § 1.16(b))	2 - 3 =	0 × \$86.00 =	\$0.00	
Multiple Dependent Claim(s), if any (37 C.F.R. § 1.16(d))			(s), if any (37 C.F.R. § 1.16(d))	+ \$290.00 =		\$0.00	
				Fili	ng Fee Calculation	\$770.00	
7.	Small Entity Statement(s)						
	×	Verifie	d Statement(s) that this is a filing by	a small entity under	37 C.F.R. §§ 1.9 and 1.27.		
				Fil	ling Fee Calculation (50% of above	\$385.00	
8.	Fee Payment Being Made At This Time						
	×	Enclose	ed				
		×	basic filing fee			\$385.00	
			•	To	otal Fees Enclosed	\$385.00	

PATENT

Attorney Docket No.: MSU-08334

9.	Mathod	of Payment of Fees				
9.	Method	•				
		Check in the amount of \$385.00				
10.	Authorization To Charge Additional Fees and Credit Overpayment					
	X	The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No.: 08-1290. An originally executed duplicate of this transmittal is enclosed for this purpose.				
11.	Power of Attorney by Assignee					
	×	Enclosed (unexecutedO				
12.	Return Receipt Postcard					
	×	Enclosed				
Dated: _		January 16, 2004 David A. Casimir				

Registration No.: 42,395

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Statement Where No Further Pages Added

This transmittal ends with this page.